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**Application Data Sheet  
Supplemental**

**Application Information**

Application Number:: 10/608,817  
Filing Date:: 06/25/2003  
Application Type:: Regular  
Subject Matter:: Utility  
Title:: CONTROLLED-RELEASE PHARMACEUTICAL FORMULATIONS  
Attorney Docket Number:: PC25096A

**Inventor Information**

Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Given Name:: Alfred  
Family Name:: Berchielli  
City of Residence:: Niantic  
State or Prov of Residence:: Connecticut  
Country of Residence:: US  
Street:: 23 Stoneywood Drive  
City:: Niantic  
State or Province:: Connecticut  
Postal or Zip Code:: 06357  
Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Given Name:: Patrick D.  
Family Name:: Daugherty  
City of Residence:: Niantic  
State or Prov of Residence:: Connecticut  
Country of Residence:: US  
Street:: 47 Sleepy Hollow Road  
City:: Niantic  
State or Province:: Connecticut  
Postal or Zip Code:: 06357  
Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Given Name:: Sheri L.  
Family Name:: Shamblin  
City of Residence:: North Stonington  
State or Prov of Residence:: Connecticut  
Country of Residence:: US  
Street:: 141 Hangman Hill Road

City:: North Stonington  
State or Province:: Connecticut  
Postal or Zip Code:: 06359  
Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Given Name:: Avinash G.  
Family Name:: Thombre  
City of Residence:: East Lyme  
State or Prov of Residence:: Connecticut  
Country of Residence:: US  
Street:: 15 Mackinnon Place  
City:: East Lyme  
State or Province:: Connecticut  
Postal or Zip Code:: 06357  
Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Given Name:: Kenneth C.  
Family Name:: Waterman  
City of Residence:: East Lyme  
State or Prov of Residence:: Connecticut  
Country of Residence:: US  
Street:: 11 Jeremy Drive  
City:: East Lyme  
State or Province:: Connecticut  
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**Correspondence Information**

Correspondence Customer Number:: 28523

**Representative Information**

Representative Customer Number:: 28523

**Assignee Information**

Assignee Name:: Pfizer Inc